AZ Form (Rev. 1/2015) TRANSCRIPT ORDER					DUE DATE:	
1. NAME				2. PHONE NUMBER	3. DATE	
4. FIRM NAME						
5. MAILING ADDRESS				6. CITY	7. STATE	8. ZIP CODE
9. CASE NUMBER 10. JU		UDGE		DATES OF	PROCEEDINGS	
				11.	12.	
13. CASE NAME					OF PROCEEDINGS	
16. ORDER FOR				14.	15. STATE	
APPEAL CRIMINAL			CRIMINAL JUSTICE ACT	STICE ACT BANKRUPTCY		
NON-APPEAL CIVIL				IN FORMA PAUPERIS	OTHER (Specify)	
17. TRANSCRIPT	REQUESTED (Specify po	rtion(s) and date	e(s) of proceeding(s) fo	or which transcript is requested.)		
	ORTIONS	DATE(S)		PORTION(S)	DATE(S)	
VOIR DIRE				TESTIMONY (Specify)		
	ATEMENT (Plaintiff)					
	CATEMENT (Defendant)					
CLOSING ARGUMENT (Plaintiff)				PRE-TRIAL PROCEEDING	<u> </u>	
	RGUMENT (Defendant)				+	
OPINION OF COURT			OTHER (G. 16.)	+		
JURY INSTRUCTIONS SENTENCING				OTHER (Specify)		
BAIL HEARI 18. ORDER	NG			1		
CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FIRST COPY	# OF ADDITIONAL COPIES	DELIVERY INSTRUCTIONS (Check all that apply.)	ESTIMA	TED COSTS
30 DAYS	Joseph Company		001125	PAPER COPY		
14 DAYS				PDF (e-mail)		
7 DAYS						
DAILY				ASCII (e-mail)		
HOURLY						
REALTIME						
CERTIFICATION (19. & 20.) By signing below, I certify that I will pay all charges (deposit plus additional).				E-MAIL ADDRESS		
19. SIGNATURE				NOTE: IF ORDERING MORE THAN ONE FORMAT, THERE WILL BE AN ADDITIONAL CHARGE.		
20. DATE						
TRANSCRIPT TO BE PREPARED BY				ESTIMATE TOTAL		
ORDER RECEIVED		DATE	BY	PROCESSED BY	PHONE NU	MBER
DEPOSIT PAID				DEPOSIT PAID		
TRANSCRIPT ORDERED				TOTAL CHARGES		
TRANSCRIPT RECEIVED				LESS DEPOSIT		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT				TOTAL DUE		

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